Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.	ECENE	D	CALIFORNIA 460
	Statement covers period from07/01/2011	Date of election if application (Month, Day, Year)	JAN 23 PM I	: 09	Page 1 of 6 For Official Use Only
	through12/31/2011	11/06/2012 OTV	THE CITY CLERK		
State Candidate Election Committee  Recall (Also Complete Part 5)  General Purpose Committee  Sponsored Small Contributor Committee	plete Parts 1, 2, 3, and 4.  marily Formed Ballot Measure mmittee Controlled Sponsored o Complete Part 6) marily Formed Candidate/ iceholder Committee o Complete Part 7)	2. Type of Statement:  Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	ermination)	Quarterly Special C Supplem	y Statement Odd-Year Report sental Preelection nt - Attach Form 495
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Curry for Newport Beach Council 2012	NUMBER 1282505	Treasurer(s)  NAME OF TREASURER  Lysa Ray  MAILING ADDRESS			
STREET ADDRESS (NO P.O. BOX)  40 Vienna CITY STATE ZIP CODE  Newport Beach, CA 92660  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX	949-644-0800	GO3 E Alton Suite H CITY Santa Ana, CA 92705 NAME OF ASSISTANT TREASUR		ZIP CODE	AREA CODE/PHONE 714-540-2295
OPTIONAL: FAX / E-MAIL ADDRESS	AREA CODE/PHONE	CITY  OPTIONAL: FAX / E-MAIL ADDRE	STATE	ZIP CODE	AREA CODE/PHONE
Verification  I have used all reasonable diligence in preparing and reviewing this under penalty of perjury under the laws of the State of California the Executed on Date    Date   Date	BySignature of Control  BySignature of Signature of Signature of Control	Pledge the information contained here  Signature of Treasurer or Assistant Treasurer or Ass	onent or Responsible Officer of te Measure Proponent	•	true and complete. I certify

Page 2 of 6

Officeholder or Candidate Controlled Committee	6.	Primarily Formed Ballo	t Massura Committa	
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE	- measure committe	е
Keith Curry		NAME OF BALLOT MEASURE		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF AF City Council Member Newport Beach : 7	PPLICABLE)	BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY 40 Vienna Newport Beach, CA 92660	STATE ZIP			state measure proponent, if ar
Related Committees Not Included in this Statement: List not included in this statement that are controlled by you or are primarily a contributions or make expenditures on behalf of your candidacy.	any committees formed to receive	OFFICE SOUGHT OR HELD	IDATE, OR PROPONENT	DISTRICT NO. IF ANY
COMMITTEE NAME I.D. NUMBER				
NAME OF TREASURER CONTROLLED C	7. □ NO	Primarily Formed Candi officeholder(s) or candidate(s) is	date/Officeholder Co for which this committee is	ommittee List names of s primarily formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)		NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE SOU	GHT OR HELD SUPPORT OPPOSE
CITY STATE ZIP CODE AR	EA CODE/PHONE	NAME OF OFFICEHOLDER OR CAI	NDIDATE OFFICE SOU	GHT OR HELD SUPPORT OPPOSE
COMMITTEE NAME I.D. NUMBER		NAME OF OFFICEHOLDER OR CAI	NDIDATE OFFICE SOU	GHT OR HELD SUPPORT OPPOSE
NAME OF TREASURER CONTROLLED C	OMMITTEE?	NAME OF OFFICEHOLDER OR CAN	NDIDATE OFFICE SOU	GHT OR HELD SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)				OPPOSE
CITY STATE ZIP CODE ARI	EA CODE/PHONE	Attach	continuation sheets if n	necessary

## Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 460
from	07/01/2011	FORM 400
through _	12/31/2011	Page3 of6

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Curry for Newport Beach Council 2012 1282505 Column A Contributions Received Column B Calendar Year Summary for Candidates TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE **General Elections**  Monetary Contributions ...... Schedule A, Line 3 \$ \_\_\_\_\_\_ 1/1 through 6/30 7/1 to Date 150.00 18,269.00 3. SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ \_\_\_\_\_ 20. Contributions 150.00 18,269.00 Received 4. Nonmonetary Contributions ...... Schedule C, Line 3 0.00 0.00 21. Expenditures Made **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made ...... Schedule H, Line 3 \_\_\_\_0.00 0.00 22. Cumulative Expenditures Made\* \$ \_\_\_\_\_192.00 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills) ......Schedule F, Line 3 0.00 0.00 Date of Election Total to Date (mm/dd/yy) 0.00 0.00 **Current Cash Statement** To calculate Column B, add 13. Cash Receipts ...... Column A, Line 3 above amounts in Column A to the 150.00 corresponding amounts 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 \*Amounts in this section may be different from amounts 0.00 from Column B of your last reported in Column B. 15. Cash Payments ...... Column A, Line 8 above report. Some amounts in 107.00 Column A may be negative 16. ENDING CASH BALANCE .......... Add Lines 12 + 13 + 14, then subtract Line 15 \$ 101.72 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED ...... Schedule B, Part 2 \$ \_\_\_\_\_ for this calendar year, only 0.00 carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 18. Cash Equivalents ...... See instructions on reverse \$ 19. Outstanding Debts ...... Add Line 2 + Line 9 in Column B above \$ \_\_\_\_\_18,269.00 FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Sched	ule	<b>B</b> -	<b>Part</b>	1
Loans	Rec	eive	he	

## Type or print in ink.

SCH	IEDL	JLE B	- P/	RT
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Loans Received	to whole dollars.				from07/0:	vers period	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE					through12/3:	L/2011		. of6
NAME OF FILER					~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		I.D. NUMBER	
Curry for Newport Beach Council 2012							1282505	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOR	N_ CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Keith Curry	Councilman	FERIOD		☐ PAID	PERIOD	TEMOS	LOAN	<del>                                     </del>
40 Vienna				0.0	2,119.00	5.00	3 500 00	CALENDAR YEAR
Newport Beach, CA 92660	City of Newport Beach			\$FORGIVEN	\$	0.00% RATE	\$	\$150.00 PER ELECTION**
TENIND COM OTH PTY SCC		\$	\$	\$	DATE DUE	\$	03/03/2006 DATE INCURRED	G08 1,248.00 G0g6 17,610.79
Keith Curry 40 Vienna Newport Beach, CA 92660	Councilman City of Newport Beach			PAID  \$	\$	0%% RATE	\$	CALENDAR YEAR  \$150.00  PER ELECTION **
†K IND COM OTH PTY SCC	Councilman	\$	\$	\$	DATE DUE	s	10/28/2006 DATE INCURRED	G08 1,248.00 G06 17,610.79
40 Vienna Newport Beach, CA 92660	City of Newport Beach			PAID  0.00  FORGIVEN	\$	_0%% RATE	\$900.00	\$150.00 PER ELECTION **
†☑IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	11/03/2006 DATE INCURRED	G08 1,248.00 G06 17,610.79
		SUBTOTALS \$	0.00 \$	0.00	\$ 13,019.00	0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period (Total Column (b) plus unitemized loans	s of less than \$100.)			\$	150.00	(+0.	ontributor Codes	
Loans paid or forgiven this period      (Total Column (c) plus loans under \$100 paid or forgiven.)      (Include loans paid by a third party that are also itemized on Schedule A.)			0.00	IND CO OTI	— Individual M – Recipient Cor (other than F H – Other (e.g., I	TY or SCC) business entity)		
3. Net change this period. (Subtract Line 2 from Line 1.)					utor Committee			
*Amounts forgiven or paid by another party also n	nust be reported on Schedule A.	Ì						

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

\*\* If required.

Sched	ule B -	Part 1
Loans	Receive	he

Type or print in ink.

SCHEDL		

Loans Received	Am	to whole dolla			Statement co	vers period	CALIFORNIA 460	
					from07/0.	-, 2011	FURIVI	
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2011	Page5	of 6
NAME OF FILER							I.D. NUMBER	
Curry for Newport Beach Council 2012							1282505	
	7	751						
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVER THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Keith Curry	Councilman			☐ PAID	, ENOD			CALENDAR YEAR
40 Vienna Newport Beach, CA 92660	City of Newport Beach	100.00	0.00	\$O.00	\$	0% % RATE	\$	1
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	02/05/2007 DATE INCURRED	G0g6 17,610.79
Keith Curry 40 Vienna	Councilman			PAID 0.00	5,000.00	_0%%	5,000.00	CALENDAR YEAR
Newport Beach, CA 92660	City of Newport Beach	5,000.00	0.00	FORGIVEN 0.00		RATE 0.00	10/23/2008	PER ELECTION **  G08 1,248.00  GQ6 17,610.79
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		20-21		-	DATE DUE	, ————————————————————————————————————	DATE INCURRED	27,010.79
Keith Curry 40 Vienna	Councilman			PAID 0.00	150.00			CALENDAR YEAR
Newport Beach, CA 92660	City of Newport Beach			\$FORGIVEN	\$	_0%% RATE	\$	\$150.00 PER ELECTION**
<sup>†</sup> ⊠ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	08/11/2011 DATE INCURRED	G08 1,248.00 G06 17,610.79
		SUBTOTALS \$	150.00 \$	0.00	\$ 5,250.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period  (Total Column (b) plus unitemized loans	of less than \$100.)			\$	150.00	(+0-	ontributor Codes	
2. Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	paid or forgiven.) are also itemized on Sched	ule A.)				IND COI OTI	ontributor Codes  I – Individual  M – Recipient Cor (other than F  H – Other (e.g., t  / – Political Party	PTY or SCC) business entity)
<ol> <li>Net change this period. (Subtract Line Enter the net here and on the Summary</li> </ol>	2 from Line 1.) Page, Column A, Line 2.		•••••	NET \$	150.00 sy be a negative number)		C – Political Party	
*Amounts forgiven or paid by another party also p	guet he reported on Sehedule A	)						

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

\*\* If required.

## Schedule E Payments Made

## Type or print in ink. Amounts may be rounded

Statement covers period	CALIFORNIA 160
from07/01/2011	FORM 460
through12/31/2011	Page6 of6
	I.D. NUMBER
	1282505

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Curry for Newport Beach Council 2012 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances returned contributions contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals fundraising events FND polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE DESCRIPTION OF PAYMENT **AMOUNT PAID** Lysa Ray Campaign Services Corp PRO 75.00 603 E Alton Avenue Suite H Santa Ana, CA 92705 \* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 75.00 Schedule E Summary 75.00 2. Unitemized payments made this period of under \$100 ......\$ \_\_\_\_ 32.00 0.00 

> FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)